

Bureau of Licensure and Certification

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>NVN413AGC</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED  <b>09/04/2008</b>
NAME OF PROVIDER OR SUPPLIER  <b>ATRIA SUMMIT RIDGE</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>4880 SUMMIT RIDGE DR RENO, NV 89503</b>		
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Y 000	Initial Comments  This Statement of Deficiencies was generated as a result of an annual State Licensure survey conducted in your facility from 9/2/08 to 9/4/08. This State Licensure survey was conducted by the authority of NRS 449.150, Powers of the Health Division.  The facility is licensed for 85 Residential Facility for Group beds for elderly and disabled persons, 63 Category I and 22 Category II residents. The census at the time of the survey was 74. Fifteen resident files were reviewed and eleven employee files were reviewed. One discharged resident file was reviewed.  The following deficiencies were identified:	Y 000		
Y 103 SS=F	449.200(1)(d) Personnel File - NAC 441A  NAC 449.200 1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include: (d) The health certificates required pursuant to chapter 441A of NAC for the employee.  This Regulation is not met as evidenced by: NAC 441A.375 Medical facilities, facilities for the dependent and homes for individual residential care: Management of cases and suspected cases; surveillance and testing of employees; counseling and preventive treatment. 3. Before initial employment, a person employed in a medical facility, a facility for the dependent or a home for individual residential care shall have	Y 103		

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TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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Y 103	<p>Continued From page 1</p> <p>a:</p> <p>(a) Physical examination or certification from a licensed physician that the person is in a state of good health, is free from active tuberculosis and any other communicable disease in a contagious stage; and</p> <p>(b) Tuberculosis screening test within the preceding 12 months, including persons with a history of bacillus Calmette-Guerin (BCG) vaccination.</p> <p>If the employee has only completed the first step of a 2-step Mantoux tuberculin skin test within the preceding 12 months, then the second step of the 2-step Mantoux tuberculin skin test or other single-step tuberculosis screening test must be administered. A single annual tuberculosis screening test must be administered thereafter, unless the medical director of the facility or his designee or another licensed physician determines that the risk of exposure is appropriate for a lesser frequency of testing and documents that determination. The risk of exposure and corresponding frequency of examination must be determined by following the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (h) of subsection 1 of NAC 441A.200.</p> <p>Based on record review on 9/2/08, the facility did not ensure 3 of 6 employees who had worked at the facility for more than 12 months met the requirements for annual tuberculosis (TB) tests.</p> <p>Findings include:</p> <p>Employee #7 was hired on 2/7/07 and completed an initial two-step TB test on 2/9/07. The employee's annual TB test for 2008 was not initiated until 8/3/08, six months late. The employee completed a second step of the TB test on 8/14/08.</p>	Y 103		

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Y 103	Continued From page 2  Employee #8 was hired on 4/5/02. The employee's 2007 TB test was initiated on 8/13/07 and completed on 8/16/07. The employee's annual TB test for 2008 was late and was not initiated until 8/28/08 and was read on 8/30/08. The administrator reported the employee had started a second step.  Employee #10 was hired on 1/9/06. The employee's annual TB test for 2007 was initiated on 1/8/07 and completed on 1/10/07. The employee's annual TB test for 2008 was not initiated until 7/16/08, six months late. The employee completed the second step of the TB test on 7/25/08.  Severity: 2 Scope: 3	Y 103		
Y 250 SS=C	449.217(1) Kitchens-Equipment works; Clean and Sanitary  NAC 449.217 1. The equipment in a kitchen of a residential facility and the size of the kitchen must be adequate for the number of residents in the facility. The kitchen and the equipment must be clean and must allow for the sanitary preparation of food. The equipment must be in good working condition.  This Regulation is not met as evidenced by: Based on observation, interview and record review on 9/2/08, the facility did not ensure its kitchen was clean and allowed for the sanitary	Y 250		

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Y 250	Continued From page 3  preparation of food.  Findings include:  A tour of the kitchen at 10:00 AM revealed the following:  1. The floors in the kitchen area, walk-in refrigerator and freezer were dirty and needed to be cleaned of food residue and wrappers.  2. The concentration of the Quaternary sanitizing solution in the dishrag bucket was high, with a reading of 400 ppm. (The manufacturer's recommendation is 150-200 ppm.)  Severity: 1 Scope: 3	Y 250		
Y 251 SS=D	449.217(2) Storage of Food-Perishable foods refrigerated  NAC 449.217 2. Perishable foods must be refrigerated at a temperature of 40 degrees Fahrenheit or less. Frozen foods must be kept at a temperature of 0 degrees or less.  This Regulation is not met as evidenced by: Based on observation and interview on 9/2/08, the facility did not ensure that spoiled food was discarded in a timely manner.  Findings include:  An inspection of the kitchen's walk-in refrigerator at 10:00 AM revealed a box of moldy lemons,	Y 251		

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Y 251	Continued From page 4  soft cucumbers, and a bruised melon. The kitchen supervisor stated that she planned to discard these items soon.  Severity: 2 Scope: 1	Y 251		
Y 434 SS=B	449.229(3) Emergency Drills  NAC 449.229 3. A drill for evacuation must be performed monthly on an irregular schedule, and a written record of each drill must be kept on file at the facility for not less than 12 months after the drill.  This Regulation is not met as evidenced by: Based on record review on 9/2/08, the facility did not ensure monthly evacuation drills were conducted on an irregular schedule for the past 6 of 12 months.  Findings include:  The facility did not have documentation that fire drills had been conducted for August, July, June, and May of 2008. The facility did not have documentation that fire drills had been conducted for December and November of 2007.  Severity: 1 Scope: 2	Y 434		
Y 444 SS=C	449.229(9) Smoke Detectors  NAC 449.229 9. Smoke detectors must be maintained in proper operating conditions at all times and must be	Y 444		

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Y 444	Continued From page 5  tested monthly. The results of the tests pursuant to this subsection must be recorded and maintained at the facility.  This Regulation is not met as evidenced by: Based on record review on 9/2/08, the facility did not ensure smoke detectors were tested 6 of the past 12 months.  Findings include:  The smoke detector testing log revealed facility smoke detectors were not checked during the months of February, March, May, June, July and August of 2008. The facility had a complete electronic fire alarm system that had been tested and certified according to regulations, but the facility had added additional battery operated smoke detectors to some resident rooms. These smoke detectors lacked documentation that they had been tested and maintained properly.  Severity: 1 Scope: 3	Y 444			
Y 876 SS=B	449.2742(4) NRS 449.037  NAC 449.2742 4. Except as otherwise provided in this subsection, a caregiver shall assist in the administration of medication to a resident if the resident needs the caregiver's assistance. A caregiver may assist the ultimate user of controlled substances or dangerous drugs only if the conditions prescribed in subsection 6 of NRS 449.037 are met.  This Regulation is not met as evidenced by: NRS 449.037(6). The Board shall adopt separate	Y 876			

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Y 876	Continued From page 6  regulations regarding the assistance which may be given pursuant to NRS 453.375 and 454.213 to an ultimate user of controlled substances or dangerous drugs by employees of residential facilities for groups. NRS 453.375 Authority to possess and administer controlled substances. A controlled substance may be possessed and administered by the following persons: 6. An ultimate user or any person whom the ultimate user designates pursuant to a written agreement. NRS 454.213 Authority to possess and administer dangerous drug. A drug or medicine referred to in NRS 454.181 to 454.371, inclusive, may be possessed and administered by: 10. An ultimate user or any person designated by the ultimate user pursuant to a written agreement. Based on record review on 9/2/08, the facility did not ensure it had obtained signed written agreements to assist 2 of 14 residents with their medications. Findings include: Signed ultimate user agreements were not found in the files of Residents #9 and #12. This is a repeat deficiency for the 9/20/07 annual survey. Severity: 1 Scope: 2	Y 876			
Y 944 SS=A	449.2749(2) Resident File / Discharge  NAC 449.2749 2. The document required pursuant to paragraph (j) of subsection 1 must indicate the location to which the resident was transferred or the person in whose care the resident was discharged. If the resident dies while a resident of the facility, the document must include the time and date of the	Y 944			

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Y 944	<p>Continued From page 7</p> <p>death and the dates on which the person responsible for the resident was contacted to inform him of the death.</p> <p>This Regulation is not met as evidenced by: Based on record review and interview on 9/2/08, the facility did not have discharge documentation regarding 1 of 1 residents who had left the facility.</p> <p>Findings include:</p> <p>The administrator provided the closed file of Resident #16 for review. The administrator reported the resident gave 30-day notice to the facility and moved out of state in March 2008. The facility did not have a discharge document indicating when the resident left the facility or any other information concerning the discharge.</p> <p>Severity: 1 Scope: 1</p>	Y 944			

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